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DEC 0 9 2003 CS

## TRANSMITTAL FORM

FORM
(to be used for all correspondence after initial filing)

	Application Number	10/603,833				
	Filing Date	June 26, 2003				
	First Named Inventor	Michael A Tzannes et al.				
Group Art Unit		2631				
	Examiner Name	Unknown				
	Attorney Docket Number	T3653-8793US05 (Formerly 081513-328)				

Total Number of Pages III This Suc	Omission		Attorney Docket Number	(Formerly 081513-328)		
ENCLOSURES (check all that apply)						
Fee Transmittal Form  Fee Attached  Amendment / Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Stateme  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts under 37 CFR 1.52 or 1.53		Assignment Papers (for an Application)  Drawing(s)  Declaration and Power of Attorney  Licensing-related Papers  Petition  Petition to Convert to a Provisional Application  Power of Attorney, Revocation Change of Correspondence Address  Terminal Disclaimer  Request for Refund  CD, Number of CD(s)		After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Application Data Sheet Other Enclosure(s) (please identify below): Statement of Facts For Application For Patent When An Inventor(s) Cannot Be Reached (w/ Exhibits 1-12 attached)		
		Remarks  The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-1165 (T3653-8793US05) for the above identified docket number.				
	SIGNATUR	E OF APPL	ICANT, ATTORNEY, O	R AGENT		
Individual name Miles & S		Vick, Reg. No. 45,285 tockbridge P.C. acle Drive				
Signature						
Date		9, 2003				
CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]						
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to: Mail Stop, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at, on						
Signature:						
Name:						

approved f	or use the	rough 10/3	1/2002. O	MB 065	1-0032
				// SD/11/	

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DEC 0 9 St	(3)	3
<b>.</b>	pplicant claims small entity status. See	
TEAT . TO SEE	TAL AMOUNT OF PAYMENT	\$904.00
IHAU		

\$904.00

Complete if Known					
Application Number	10/603,833				
Filing Date	June 26, 2003				
First Named Inventor	Michael A. Tzannes				
Examiner Name	2631				
Art Unit	Not yet assigned				
Attorney Docket No.	T3653-8793US05 (Formerly 081513-328)				

METHOD OF PAYMENT (check all that apply)	<u> </u>			F	EE CALCULATION (continued)	
Check Credit Card Money Other None	3. ADDITIONAL FEES					
Deposit Account:		Entity	Small	Entity		
Deposit 50 1165 (T2652 970211905)	Fee	Fee	Fee	Fee	Fee Description	
Account Number 50-1165 (T3653-8793US05)	Code   1051	( <b>\$</b> ) 130	Code 2051	(\$) 65	Surcharge – late filing fee or oath	130.00
	1052	50	2052	25	Surcharge - late provisional filing fee or cover	130.00
	1052	20	2002		sheet	i
Deposit N. Charles I. C. Charles I. C. C.	1053	130	1053	130	Non-English specification	
Account Name Miles & Stockbridge, P.C.	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
11.47.0	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner	<u> </u>
The Commissioner is authorized to: (check all that apply)					action	
Charge fee(s) indicated below Credit any overpayments	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	1
Charge any additional fee(s) during the pendency of this application	1251	110	2251	55	Extension for reply within first month	110.00
Charge fee(s) indicated below, except for the filing fee	1252	420	2252	210	• •	110.00
to the above-identified deposit account.					Extension for reply within second month	
TERRICAL CALLARYON	1253	950	2253	475	Extension for reply within third month	
FEE CALCULATION	1254	1,480	2254	740	Extension for reply within fourth month	<b></b>
1. BASIC FILING FEE	1255	2,010	2255	1,005	Extension for reply within fifth month	
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1401	330	2401	165	Notice of Appeal	
Fee Fee Fee Fee Description  Code (\$) Code (\$) Fee Paid	1402	330	2402	. 165	Filing a brief in support of an appeal	
	1403	290	2403	145	Request for oral hearing	
1001 770 2001 385 Utility filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1002 340 2002 170 Design filing fee	1452	110	2452	55	Petition to revive - unavoidable	
	1453	1,330	2453	665	Petition to revive - unintentional	<u> </u>
<u> </u>	1501	1,330	2501	665		
1004 770 2004 385 Reissue filing fee	1502	480	2502	240	Utility issue fee (or reissue)  Design issue fee	
1005 160 2005 80 Provisional filing fee	1502		l		•	
CURTOTAL (1)		640	2503	320	Plant issue fee	
SUBTOTAL (1) \$0	1460	130	1460	130	Petitions to the Commissioner	130.00
	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1806	180	1806	180	Submission of Information Disclosure Stmt	
Fee from	8021	40	8021	40	Recording each patent assignment per property	_
Extra Claims below Fee Paid  Fotal Claims 112 -87** = 25 X 18 = 450.00		770	2809	385	(times number of properties) Filing a submission after final rejection	
	1809				(37 CFR 1.129(a))	
Independent 48 -47* = 1 X 84 = 84.00	1810	770	2810	385	For each additional invention to be examined	
Claims Multiple Dependent  X = 0	1801	770	2801	385	(37 CFR 1.129(b)) Request for Continued Examination (RCE)	
	1	.,,	2001	303	request for continued Examination (RCE)	ľ
Large Entity Small Entity	1802	900	1802	900	Request for expedited examination of a design	
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)		[			application ·	
``	Other f	fee (specif	fy)		<del></del>	
1202 18 2202 9 Claims in excess of 20						
1201 84 2201 42 Independent claims in excess of 3	*Redu	ced by Ra	sic Filin	g Fee Paid	SUBTOTAL (3) \$370.00	
1203 280 2203 140 Multiple dependent claim, if not paid		оу па		P r cc r and	300101AL(3) 3370.00	
1204 84 2204 42 ** Reissue independent claims over	ł				CERTIFICATE OF MAILING	
original patent				tify that this	s correspondence is being deposited with the United	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	Service Patents	e with suff . Washine	ticient po	ostage as fir 20231, on	rst class mail in an envelope addressed to Commission	ner for
SUBTOTAL (2) \$534.00		.,	<sub>5</sub> , DC	i, oli		
**or number previously paid, if greater; For Reissues, see above	Name:					
SUBMITTED BY	Vanist	mointee 1	<del></del>	45.005	Complete (if applicable)	
Name (Print/Type) Jason H. Vick	(Artor)	ration No ney/Agen	o.	45,285	Telephone 703-903-9000	
Signature		y g c //	<u>/_ L</u>		Date December 9, 20	003
<del></del>					December 9, 20	